

DFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
WATANABE et al.) Art Unit 2167
Application Number: 10/720,178) Examiner
Filed: November 25, 2003) Le, Miranda
For: DATA DISTRIBUTION METHOD, DATA SEARCH)
METHOD, AND DATA SEARCH SYSTEM)
Attorney Docket No. HIRA.0131)

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	6	6	XXX (Over 20)	x \$50	0
Independent Claims	2	1	4 (Over 3)	x \$210	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$370	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

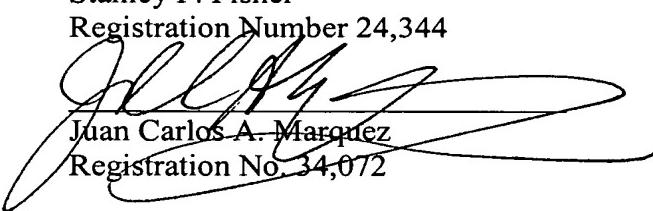
- | | |
|---|--|
| <input checked="" type="checkbox"/> Response to Office Action
(w/claim amendments) | <input type="checkbox"/> Petition for Extension of Time |
| <input type="checkbox"/> Substitute Specification | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> Preliminary Amendment | <input type="checkbox"/> Letter to Draftsperson w/ _____ sheet of replacement drawings |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Other _____ |

- Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for
_____. A duplicate copy of this paper is enclosed.
- A check in the amount of _____ to cover _____ is enclosed.
- The Commissioner is hereby authorized to charge any additional fees associated with this
communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit
Account Number 08-1480**.

Respectfully submitted,

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